

STATE OF ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS



NOTICE OF REQUEST FOR QUOTATION

SOLICITATION NUMBER: J05041

SOLICITATION DUE DATE/TIME: October 27, 2004, 5:00 PM MST

SUBMITTAL LOCATION: Arizona Department of Juvenile Corrections*

Procurement Office 1624 W. Adams, 1st Floor Phoenix, Arizona 85007-2631

DESCRIPTION: Install Package Air Conditioning/Heating Units at Black Canyon School (BCS)

In accordance with A.R.S. § 41-2535, written quotations for materials or services specified will be received by the Arizona Department of Juvenile Corrections (Department), at the above specified location, until the time and date cited.

Quotations must be in the actual possession of the Department's Procurement Office on or prior to the exact time and date indicated above. Late quotations will not be considered, except as provided in the Arizona Procurement Code.

The terms and conditions included herein should be reviewed and understood before preparing a quotation. Please reference the name of the Solicitation Contact Person and RFQ number on the outside of the return envelope.

Dave Novak, CPPB Name (602) 542-6677 Phone October 14, 2004 Date

Solicitation Contact Person:

*AN EQUAL OPPORTUNITY AFFIRMATIVE ACTION EMPLOYER



OFFER AND ACCEPTANCE

Arizona Department of Juvenile Corrections Procurement Office 1624 W. Adams Phoenix, Arizona 85007-2631

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OFFER

The Undersigned hereby offers and agrees to furnish the materi specifications and amendments in the Solicitation.	al, service or construction in compliance with all terms, conditions,
Arizona Transaction (Sales) Privilege	For Clarification of this Offer contact:
Tax License No.:	Name:
Federal Employee Identification	Phone:
No:	FAX:
	E-Mail:
Company Name	Signature of Person Authorized to Sign Offer
Address	Printed Name
City State Zip	Title
OFFER ACCEPTANCE AND CONTRA	ACT AWARD (For State of Arizona use only)
Your Offer to provide Install Package Air Conditioning/Heating L. The Contractor is now bound to perform based upon the Solicita Contractor is hereby cautioned not to commence any billable we Contract until Contractor receives an executed purchase order capplicable.	ation and the Contractor's Offer as accepted by the State. The ork or provide any material, service or construction under this
This Contract shall henceforth be referred to as Contract No.:	
Line Items Awarded:	
State of Arizona Awarded this day of	, 2004
Purchasing Manager	

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- 1. SUBMISSION: Quotations shall be signed where applicable and received as designated on the cover page of this document, no later than as indicated.
- 2. OPENING: This is an informal quotation which will not be read at a public opening; however, the information may be publicly reviewed after an award.
- 3. STANDARD PROVISIONS: The State's Uniform Terms and Conditions (dated 4/04) are a part of this document as if fully set forth herein. Copies of this document are available upon request.
- 4. TAXES: The State of Arizona is exempt from federal excise tax, but is subject to all applicable State and local transaction privilege taxes. Transaction privilege taxes apply to the sale and are the responsibility of the seller to remit. Failure to collect taxes from the buyer does not relieve the seller from its obligation to remit taxes.
- 5. OFFER REJECTION: The State reserves the right to waive any immaterial defect or informality; reject any and all Offers or portions thereof; or cancel a Solicitation.
- 6. OFFER ACCEPTANCE PERIOD: An Offeror submitting a quote in response to this Solicitation shall hold its Offer open for sixty (60) days from the due date stated in this Solicitation.
- 7. AWARD OF CONTRACT: Where applicable, the State reserves the right to make multiple awards or to award a Contract by individual line items or alternatives, by group of line items or alternatives, or to make an aggregate award, whichever is deemed most advantageous to the State. If the Procurement Officer determines that an aggregate award to one Offeror is not in the State's best interest, "all or none" Offers shall be rejected.
- 8. ERASURES: Erasures, interlineations, or other modifications must be initialed by the individual signing the Request for Quotation.
- 9. UNIT PRICE: Where applicable, in case of discrepancy between the unit price or rate and the extension of that unit price or rate, the unit price or rate shall govern.
- 10. PAYMENT: The State will make every effort to process payment for the purchase of goods or service within thirty (30) calendar days after receipt of goods or services and a correct invoice of amount due, unless a good faith dispute exists as to any obligation to pay all or a portion of the account. Any Offer that requires payment in less than thirty (30) calendar days shall not be considered.
- 11. PAYMENT DISCOUNT: Payment discount periods will be computed from the date of receipt of materials or services or correct invoice, whichever is later, to the date Department's warrant is mailed. Unless freight and other charges are itemized, any discount provided will be taken on full amount of invoice. Payment discounts of thirty (30) calendar days or more will be deducted from the bid price in determining the low bid. However, the Department shall be entitled to take advantage of any payment discount offered, provided payment is made within the discount period.
- 12. ARIZONA PROCUREMENT CODE: The Arizona Procurement Code (A.R.S. Title 41, Chapter 23) and its Rules and Regulations (A.A.C. Title 2, Chapter 7), are made a part of this document as if fully set forth herein. Note: A.R.S. Title 41, Chapter 23 is available at most public libraries; A.A.C. Title 2, Chapter 7 may be purchased from the Arizona Secretary of State; and both are available for review at the Arizona State Procurement Office.
- 13. INDEMNIFICATION: The Contractor shall indemnify, defend, save and hold harmless the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees (hereinafter referred to as "Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of the Contractor or any of its owners, officers, directors, agents, employees or subcontractors. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such contractor to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by the Contractor from and against any and all claims. It is agreed that the Contractor will be

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responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. In consideration of the award of this contract, the Contractor agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents and employees for losses arising from the work performed by the Contractor for the State of Arizona. (This indemnification clause shall not apply if the Contractor or subcontractor(s) is/are an agency, board, commission of university of the State of Arizona.)

14 INSURANCE:

- 14.1 The Contractor and subcontractors shall procure and maintain, until all of their obligations have been discharged, including any warranty periods under this Contract, are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors.
- The insurance requirements herein are minimum requirements for this Contract and in no way limit the indemnity covenants 14.2 contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Contractor from liabilities that might arise out of the performance of the work under this contract by the Contractor, its agents, representatives, employees or subcontractors, and Contractor is free to purchase additional insurance.
- 14.3 Minimum Scope and Limits of Insurance: The Contractor shall provide coverage at least as broad and with limits of liability not less than those stated below.
- Commercial General Liability Occurrence Form. The policy shall include bodily injury, property damage, 14.3.1 personal injury and broad form contractual liability.

14.3.1.1	General Aggregate	\$2,000,000
14.3.1.2	Products – Completed Operations Aggregate	\$1,000,000
14.3.1.3	Personal and Advertising Injury	\$1,000,000
14.3.1.4	Fire Legal Liability	\$ 50,000
14.3.1.5	Blanket Contractual Liability – Written and Oral	\$1,000,000
14.3.1.6	Each Occurrence	\$1,000,000

- The policy shall be endorsed to include the following additional insured language: "The State of Arizona, its 14.3.1.7 departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor".
- 14.3.1.8 Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.
- Automobile Liability. Bodily Injury and Property Damage for any owned, hired, and/or non-owned vehicles 14.3.2 used in the performance of this Contract.
- Combined Single Limit (CSL) 14.3.2.1
- \$1,000,000 The policy shall be endorsed to include the following additional insured language: "The State of Arizona, its 14.3.2.2 departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor, involving automobiles owned, leased, hired or borrowed by the Contractor."
- 14.3.3 Worker's Compensation and Employers' Liability

14.3.3.1	Workers' Compensation	Statutory
14.3.3.2	Employers' Liability	
14.3.3.2.1	Each Accident	\$ 500,000
14.3.3.2.2	Disease – Each Employee	\$ 500,000
14.3.2.2.3	Disease – Policy Limit	\$1,000,000
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- The policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, 14.3.3.3 boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.
- This requirement shall not apply to: Separately, each Contractor or subcontractor exempt under A.R.S. § 14.3.3.4 23-901, and when such Contractor or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form.
- Additional Insurance Requirements. The policies are to contain, or be endorsed to contain, the following provisions: 14.4
- The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and 14.4.1 employees wherever additional insured status is required such additional insured shall be covered to the full limits of

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- liability purchased by the Contractor, even if those limits of liability are in excess of those required by this Contract.
- 14.4.2 The Contractor's insurance coverage shall be primary insurance with respect to all other available sources.
- 14.4.3 Coverage provided by the Contractor shall not be limited to the liability assumed under the indemnification provisions of this Contract.
- Notice of Cancellation. Each insurance policy required by the insurance provisions of this Contract shall not be suspended, voided, cancelled, reduced in coverage or in limits except after 30 days prior written notice has been given to the State of Arizona. Such notice shall be sent directly to the Department's contact person to receive all notices relative to this Contract as identified on the Program Administration Section of the Contract and shall be sent by certified mail, return receipt requested.
- Acceptability of Insurers. Insurance is to be placed with duly licensed or approved non-admitted insurers in the State of Arizona with an "A.M. Best" rating of not less that A-VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Contractor from potential insurer insolvency.
- 14.7 <u>Verification of Coverage</u>. The Contractor shall furnish the State of Arizona with certificates of insurance (ACORD form or equivalent approved by the State of Arizona) as required by this Contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.
- All certificates and endorsements are to be received and approved by the State of Arizona before work commences. Each insurance policy required by this Contract must be in effect at or prior to commencement of work under this Contract and remain in effect for the duration of the project. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of contract.
- All certificates required by this Contract shall be sent directly to the Department's contact person to receive all notices relative to this Contract as identified on the Program Administration Section of the Contract and shall be sent by certified mail, return receipt requested. The Department's contract number and project description are to be noted on the certificate of insurance. The State of Arizona reserves the right to require complete, certified copies of all insurance policies required by this Contract at any time.
- 14.8 <u>Subcontractors:</u> Contractors' certificate(s) shall include all subcontractors as insureds under its policies or Contractor shall furnish to the State of Arizona separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.
- Approval. Any modification or variation from the insurance requirements in this Contract must have prior approval from the State of Arizona Department of Administration, Risk Management Section, whose decision shall be final. Such action will not require a formal contract amendment, but may be made by administrative action.
- Exceptions. In the event the Contractor or sub-contractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a Certificate of Self-Insurance. If the Contractor or sub-contractor(s) is/are a State of Arizona agency, board, commission, or university then none of the above shall apply.
- 15. OFFSHORE PERFORMANCE OF WORK PROHIBITED: Due to security and identity protection concerns, all services under this Contract shall be performed within the borders of the United States. All storage and processing of information shall be performed within the borders of the United States. This provision applies to work performed by subcontractors at all tiers.
- 16. AMERICANS WITH DISABILITIES ACT: People with disabilities may request special accommodations such as interpreters, alternative formats, or assistance with physical accessibility; requests for special accommodations must be made with 72 hours prior notice. A person requiring special accommodations may contact the Solicitation Contact Person identified on the first page of this Solicitation.
- 17. SMALL BUSINESS SET ASIDE: In accordance with A.R.S § 41-2535, and A.A.C. R2-7-335, this purchase is restricted to small businesses. A small business is one that, including its affiliates, is independently owned and operated, is not dominate in the type of business it conducts, and which employs fewer than 100 full-time employees or which had gross receipts of less than \$4 million in its last fiscal year. By submitting a quote in response to this Solicitation, an Offeror certifies that it is a small business as defined above.
- 18. BRAND NAMES: Any manufacturer's names, trade names, brand names, or catalog numbers used in the specifications are for the purpose of describing and establishing the general quality level, design, and performance desired. Such references are not intended to limit or restrict bidding by other vendors but are intended to approximate the quality design or performance which is desired. Any Offer which proposes like quality, design, or performance will be considered. If the

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description of your Offer differs in any way, you must give a complete detailed description of your quotation including pictures and literature where applicable. Unless a specific exception is made, the assumption will be that you are bidding exactly as specified on the Request for Quotation.

- 19. SOLICITATION AMENDMENTS: The Fax On Demand system is unable to determine what Offerors will be bidding on this solicitation; therefore, prior to Offerors submitting their quote, the Offeror should call the Contract Officer to determine if there are any amendments to this Fax On Demand solicitation.
- 20. CONTRABAND: As defined by A.R.S. § 13-2501, "contraband" means any dangerous drug, narcotic drug, intoxicating liquor of any kind, deadly weapon, dangerous instrument, explosive or any other article whose use or possession would endanger the safety, security, or preservation of order in a correctional institution or any person therein. (Any other article includes any substance which could cause abnormal behavior, i.e. marijuana, non-prescription medication, etc.) Any person who takes into or out of, or attempts to take into or out of, a correctional facility or the grounds belonging to or adjacent to a correctional facility, any item not specifically authorized by the correctional facility shall be prosecuted under the provisions of the A.R.S. § 13-2514, et. seq. All persons, including employees and visitors, entering upon these confines are subject to routine searches of their person, vehicles, property or packages.
- 21. SUBCONTRACTS. In addition to the Uniform Terms and Conditions, the Contractor shall bear full responsibility for the performance under all applicable subcontracts, shall forward copies to the Procurement Officer and shall retain copies on file.
- 22. WORK SITE SECURITY. Prior to departure from any work site, all equipment, tools, and work site SHALL be secured and inspected by a security supervisor. Noncompliance with this requirement may result in the loss of the privilege to enter the facility.
- 23. SECURITY BRIEFINGS. Prior to commencing work, all Contractor personnel providing services on grounds at secure care schools shall be required to attend a security/safety briefing provided by the Department.
- 24. BACKGROUND CHECK. Prior to the start of any construction work, the Contractor shall submit to the Department a complete list of all employees assigned to the job which includes the following information: (a) name of employee; (b) address; (c) date of birth; (d) social security number; and (e) Arizona driver's license number. The Department or using agency reserves the right to exclude any Contractor's employees who fail to submit this required information or if, as a result of the Department's background check, a finding of undesirable criminal or employment history is found regarding any of the Contractor's employees.
- 25. WARRANTY. The warranty period on workmanship and materials shall be a minimum of one (1) year from the date of acceptance. Parts which in normal trade practice carry a warranty in excess of one (1) year, shall be subject to the normal warranty. The Price Sheet shall indicate any additional duration of warranty and applicable limitations or conditions which apply to the additional duration. The Contractor agrees that it will, at its own expense, provide all labor and parts required to remove, repair or replace, and reinstall any such defective items during the term of this warranty. The Contractor shall guarantee the equipment to be supplied complies with all applicable regulations. The Contractor warrants that all:
- 25.1 Services performed hereunder shall conform to the requirements of this Contract and shall be performed by qualified personnel in accordance with the highest professional standards; and
- 25.2 Items furnished hereunder shall conform to the requirements of this Contract and shall be free from defects in design, materials and workmanship.
- 26. CONTRACTOR'S RESPONSIBILITY. The Contractor shall provide workmanship and materials that conform to local, state and federal codes, rules and good practice in the trade. The Contractor shall comply with all federal, state and local laws, ordinances, rules and regulations applicable to the performance of this Contract and the work hereunder, and shall comply with applicable laws and regulations governing safety, health and sanitation.
- 27. OTHER CONTRACTS. The Department may perform additional work related to this Contract or award other Contracts for such work. The Contractor shall cooperate fully with such other Contractors and/or State employees in the scheduling and coordination of its own work with such additional work. The Contractor shall afford other Contractors reasonable opportunity for the execution of their work and shall not commit or permit any act which will interfere with the performance of work by any other Contractor or by State employees.

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28. RELATIONSHIP OF PARTIES. In addition to the Uniform Terms and Conditions, the Contractor is advised that taxes or social security payments shall not be withheld from a State payment issued hereunder and that the Contractor should make arrangements to directly pay such expenses, if any.

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Item	Description of Material, Service or Construction	Quantity	Unit	Unit Price	Extended Price
001	Install Carrier 48TFD007-6HQ AC/Heat Package	3	EACH	\$	\$
002	Install Carrier 48TFD006-6HQ AC/Heat Package	4	EACH	\$	\$
003	Install Carrier 48TFD005-6HQ AC/Heat Package	2	EACH	\$	<u>\$</u>
004	Install Carrier 48TFE004-6HQ AC/Heat Package	1	EACH	\$	\$
	All units may not be installed at the same time, contingent				
	upon availability of funds.				
	SUBTOTAL				\$
	% ARIZONA SALES TAX, STATE, COUNTY, AND CITY*				\$
	TOTAL GROSS OFFER				\$

1.	Delivery shall be made calendar days after receipt of order.		
2.	Payment Terms:		
3.	By submitting a quote in response to this Solicitation, and in accordance with	h the small business description on pa	age
	3, paragraph 15, I certify that	(company name) meets the small bu	ısiness
	requirements.		
	Signature	Date	
4.	By submitting a quote in response to this Solicitation, and in accordance with	h the small business description on pa	age
	3, paragraph 15 and Executive Order 2003-09, I certify that		(company
	name) is a Women-Owned Minority-Owned business (51% of the	ne organization is controlled by a reco	gnized
	Woman or minority group(s). If minority owned business, identify minority:		
	Signature	Data	

^{*}Notice: If applicable taxes are not described and itemized on the quote, the State will assume that the price(s) offered includes all applicable taxes.

PROGRAM ADMINISTRATION SECTION

SOLICITATION NO: J05041	CONTRACT NO.:	

1.	In the absence of the principal authorized signatory named page 1, the following individual is authorized to sign this Contract and any amendments:			to sign this Contract	
	Name and Title		E-Mail Ad	dress	
2.	The Department shal	I address all notices relative to th	is Contract to the attention of:		
	Name and Title		E-Mail Ad	dress	
	Address		Phone Nu	mber	Fax Number
3.	The Department shal	I send payment to the Contractor	at the following address:		
	Address		City	State	Zip Code
		FOR DEP	ARTMENT USE ONLY		
1.	The Contractor shall	address all notices relative to this	Contract to the attention of:		
	Dave Novak CPPB	Purchasing Manager	DNovak@	azdic gov	
	Name and Title	. a.oaogaago.	E-Mail Ad		
	1624 W. Adams Stre	et, Phoenix, AZ 85007-2631	(602) 542	-6677	(602) 542-4992
	Address		Phone Nu		Fax Number
2.	The term of the Contr	ract shall begin on the date ident	fied in the Notice to Proceed and	d terminate June	30, 2005.
	Start Date:	End Date:	Extension Option:	None	
3.	The Contractor shall	address all programmatic and fin	ancial reports required in the Co	ntract to:	
	Matt Gilman, Busines	ss Manager	MGilman@	②azdjc.gov	
	Name and Title		E-Mail Ad		
	24601 N. 29 th Avenu	e, Phoenix, AZ 85027	(623) 780	-1303 ext 2108	(623) 879-7024
	Address		Phone Nu	mber	Fax Number

SCOPE OF WORK

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- The Arizona Department of Juvenile Corrections seeks offers for all the labor, equipment, and materials for the installation of new air conditioning and heating equipment as outlined in the specifications.
- 2 Project Site Location: Black Canyon School

24601 N. 29th Avenue Phoenix, AZ 85027

- 3 Examination of Premises: Contractor must visit the site, verify all measurements and job conditions and pay all costs necessary to perform the scope and specifications to this project.
- 4 Regulations, Permits, Fees, Charges, Inspections
- 4.1 Contractor must comply with all applicable codes, rules and regulations. All materials and work must comply with all currently adopted local building, mechanical, plumbing, electrical, and fire codes.
- 4.2 No Permits are required on this project.
- 4.3 All work must be inspected and approved by Owner. Prior to final approval, furnish the Owner with certificates of inspections and approvals by the authorities having jurisdiction, primarily State Fire Marshal's Office.
- 4.4 All renovations and upgrades shall meet or exceed compliance of ASHRAE 90.1-89.
- 5 Scope of Work
- The work in this project includes provisions for an on-site Superintendent. Contractor shall also provide all labor, material, and equipment necessary for the demolition, installation and commissioning operation of all new owner furnished air conditioning, heating, and ventilation systems as specified herein.
- 5.2 The work includes, but is not necessarily limited to, the following:
- 5.2.1 Demolition and removal of existing HVAC roof mounted units and Installation of new owner furnished packaged cooling/heating systems complete with piping, controls and accessories for a complete acceptable commissioned system. Equipment Schedule and copy of existing building mechanical plans provided in this work.
- 5.2.2 Furnishing and Installation of all supply and return ductwork including thermal and acoustical insulation to ensure a complete an acceptable commissioned system.
- 5.2.3 Installation of coil condensate and other incidental drain piping to include; hangers, trim, insulation, etc to ensure a complete acceptable commissioned system.
- 5.2.4 Cleaning, testing and air balancing of all air systems.
- 5.2.5 All work shall be inspected by the State Fire Marshal's Office and accepted prior to Owners acceptance.
- 5.2.6 Contractor shall be responsible for all costs for the interconnection, repair/connection, testing of all controls to meet current fire code requirement for duct smoke detection shutdown. Work includes coordination of Owners contracted fire alarm maintenance vendor for all HVAC equipment connected to the existing fire alarm system at Black Canyon School.
- 5.2.7 All corrective work shall be without charge to the owner on any work requiring alteration due to lack of proper supervision or failure to make proper provision in time. Correct without charge any damage to adjacent work caused by the alteration or installation.
- 5.2.8 Contractor shall be responsible for the labeling of equipment and electrical disconnects using engraved bakelite name plates permanently affixed to equipment or control device. All labeling shall be min. 3/4" high. Owner shall furnish to the contractor the equipment name and number and the contractor shall identify panel location and circuit information and label equipment disconnect appropriately.
- 5.2.9 Furnish and install conduit, wiring, raceways, junction boxes etc., controls, relays as required to ensure an acceptable commissioned operation.
- 5.2.10 Furnish and install all new fuses, overloads, and motor starters etc. for all new equipment. Motor Starters shall conform to Electrical Work specified herein.
- 5.2.11 Contractor shall be responsible for all machinery accessories such as equipment stands, supports, platforms etc. to ensure proper installation of new equipment. All fabricated accessories shall be painted with one coat of rust inhibitive primer and 2 coats of silver or white alkyd based gloss enamel.
- 5.2.12 Demolition shall conform to all environmental requirements governing hazardous wastes, all CFC refrigerant management and OSHA requirements.

SCOPE OF WORK

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- 6.1 The work includes, but is not necessarily limited to, furnishing all labor and materials to install the following:
- 6.1.1 All accessories, transformers, branch circuits, switches, feeders, controls and accessories.
- 6.1.2 Motor and power wiring for all motors and/or equipment furnished under the contract.
- 6.1.3 Re-Install temperature thermostat controls for all equipment.
- 6.1.4 Electrical wiring, including power wiring, all power wiring raceways, conduit, outlet and junction boxes rated per application and NEC, NEMA standards.
- 6.2 Contractor shall verify all motoring and equipment voltage, phases and amperages to ensure proper installation and commissioning.
- 6.3 Furnish and replace existing motor starters. Starter shall be accordance with the latest applicable standards of NEMA and UL. All Starters shall be Square D Class 8536 TYPE S magnetic type, in NEMA TYPE 12 enclosure.
- All Motors ¾ hp and larger and all automatically started motors ½ hp and smaller to have magnetic starters for overload and under voltage protection (on all phases).
- 6.5 Equipment shall be sized and selected so that motors will be non-overloading at all points on the curve.
- 6.6 Furnish and deliver one replacement set of fuses to the Plant Supervisor upon completion and acceptance of this project.
- 7 Acceptable Equipment and Supplies
- 7.1 Manual Dampers: Ruskin, Air Stream, Krueger, Carnes, Safe-Air, Metal-Form.
- 7.2 Duct Insulation: Owens-Corning Fiberglas, Certain Teed, Mansville, Pittsburgh, Dow Chemical Co.
- 7.3 Closed Cell Insulation: Halstead-Nomalco, Armstrong, Rubatex.
- 7.4 Filters: Farr, Continental, Burke, American Air Filters, Cambridge, Purolater, EFC.
- 7.5 Air Conditioning Units: Furnished by Owner, Installed by Contractor.
- 7.6 Motors: Gould, General Electric, Westinghouse, Century, Sterling, US Electric.
- 7.7 Motor Starters: Square D.
- 7.8 Air Balance: Technical Air Balance, Systems Commissioning and Testing, Precision, Arizona Air Balance.
- 7.9 Fuses: Bussman, Gould-Shawmutt, Brush.
- 8 Testing: This section describes the labor, materials and services required for the testing of all systems.
- 8.1 Clean and test all condensate drains to ensure proper drainage.
- 8.2 Air Systems and Air Distribution Test and Balance: The test and balance shall be held by the Contractor. The test and balance agency shall specialize in the balancing and testing of heating, ventilation and air conditioning systems, to balance and adjust and test air-moving equipment and air distributing or exhausting systems and shall be AABC certified.
- 8.3 Testing contractor/employee shall conduct all tests and procedures published by AABC.
- 8.4 All coordination shall be the responsibility of the contractor and testing and balance contractor.
- 8.5 Contractor shall provide 2 copies of the submittal data for the testing and balancing of the air conditioning, heating and ventilation systems.
- 8.6 Testing Procedure
- 8.6.1 Test and adjust blower RPM to design requirements to within 10% of design.
- 8.6.2 Test and record motor full load amperes.
- 8.6.3 Make pitot tube traverse of main supply ducts and obtain design CFM at fans.
- 8.6.4 Test and record system static pressure, suction and discharge.
- 8.6.5 Test and adjust system for design CFM outside air.
- 8.6.6 Test and adjust system for design CFM re-circulated air.
- 8.6.7 Test and record entering air temperatures (DB heating and cooling).
- 8.6.8 Test and record entering air temperatures (WB cooling).
- 8.6.9 Test and record leaving air temperatures (DB heating and cooling).
- 8.6.10 Test and record leaving air temperatures (WB cooling).
- 8.6.11 Adjust all main supply and return air ducts to proper design CFM.
- 8.6.12 Adjust all zones to proper design CFM supply and return.
- 8.6.13 Test and adjust each ceiling diffuser, grille and register to within 10% of design requirements.
- 8.6.14 Each grille, diffuser and register shall be identified as to location and area on an existing set of plans included with balance report. A copy of existing plans shall be provided by the Owner and shall be duplicated at no cost to the Owner to meet the Test and Balance Requirements.
- 8.6.15 Reading and tests of diffusers, grilles and registers shall include required velocity, required CFM, and test resultant CFM

SCOPE OF WORK

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after adjustments.

- 8.6.16 As part of the under this contract, the Air Conditioning Contractor shall make any changes in the pulleys, belts and dampers or the addition of dampers required for corrected balance as recommended at no additional cost to the Owner.
- 8.6.17 An additional warranty provided for 90 days after completion or resetting of any outlet, grille, supply air, return air and air intakes.
- 8.6.18 Contractor shall test heating supply mode and record CFM at each outlet. Where heating outlet CFM is more than 20% different from the proportional amount of cooling CFM, rebalance the heating and cooling CFM proportional.
- Warranty: Warrant all materials, equipment and workmanship for the project in writing to be free from defects of material, and workmanship for one year to include any normal manufacturers warranty for all equipment defects and/or workmanship.
- The Department shall provide the following equipment and accessories:
- 48TFD007-6HQ, 6 ton package rooftop standard efficiency electric cooling/natural gas heat, 460/3/60, EconoMiser. (3 each)
- 48TFD006-6HQ, 5 ton package rooftop standard efficiency electric cooling/natural gas heat, 460/3/60, EconoMiser. (4 each)
- 10.3 48TFD005-6HQ, 4 ton package rooftop standard efficiency electric cooling/natural gas heat, 460/3/60, EconoMiser. (2 each)
- 10.4 48TFE004-6HQ, 3 ton package rooftop standard efficiency electric cooling/natural gas heat, 460/3/60, EconoMiser. (1 each)
- 10.5 Stand alone controllers, gear-driven damper assemblies, and 2-10 VDC damper actuators.

ATTACHMENT A: STATE OF ARIZONA SUBSTITUTE W-9 FORM

SOLICITATION NO: J05041

Pursuant to page 3, paragraph 4.3.4, of the Uniform Terms and Conditions, in order to receive payment under any resulting Contract, the Contractor shall have a current State of Arizona Substitute W-9 Form on file with the State of Arizona.

Attached is the W-9 that should be completed and returned with your offer. Failure to submit the form with your offer, may result in a delay of payment should a Contract be awarded pursuant to this Solicitation.

DO NOT

STATE OF ARIZONA SUBSTITUTE W-9 FORM

DO NOT

SEND TO IRS SEND TO IRS REQUEST FOR TAXPAYER INFORMATION AND CERTIFICATION *****LEGIBLY PRINT OR TYPE REQUIRED INFORMATION***** Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). For other entities, it is your employer identification number (EIN). If you are a resident alien OR a sole proprietor OR do not have a number, see the instructions on page 2. Social Security Number (SSN) Employer Identification Number (EIN) 2 Name (is using SSN) or Business Name (if using EIN) - as reported with Social Security Administration or IRS Remittance Address (if different from main address) DBA, Business, Subsidiary, Trade Name, Other (circle one) Address Main Address (where tax information and general correspondence is to be mailed) City, State and ZIP code City, State, and ZIP code For Payees Exempt From Backup Withholding (See instructions on page 2) **Contact Name** Part II Telephone number Fax number Check the appropriate box: (5) Business (check one of the following) (6) Individual (check one of the following) (A) Arizona Corp.-including Non-Profit (I) U.S. Citizen/Permanent Resident (1)(E) State Employee (C) PC, PLLC, or LLC (S) Sole Owner of a Business (using SSN) (F) Financial Institution (2)(G) Federal Agency (H) Benefits Provider (7) Other (Non-corporate including, but not limited to conferences, trust funds, receiverships) (M) Medical Corp. (3)G) Arizona State Agency (O) Out of State Corp.-including Non-Profit --PLEASE BRIEFLY DESCRIBE (P) Professional Assoc. (S) Sole Owner (using EIN) (4)(G) Other Governmental Agency (T) Partnership, LLP, or LTD (8)(B) Board Member (U) Public Utility Co. Minority Business Indicator: (check one of the following that best describes your business) 06 - Small Business/Woman Owner 11 - Small Business/Minority Woman Owner 01 - Small Business 07 - Small Business/Disabled Owner 12 - Small Business/Disabled Minority Owner 02 - Minority Owner Business 08 - Minority Woman Owner Business 13 - Small Business/Disabled Minority Woman 03 - Woman Owner Business 09 - Disabled Minority Owner Business 05 - Small Business/Minority Owner 10 - Disabled Woman Owner Business 00 - None of these apply Part III Certification Under penalties of perjury, I certify that: The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), AND 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Services (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, AND
3. I am a U.S. person (including a U.S. resident alien). Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement account (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide youth correct TIN. (See instructions on page 2.) The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. Sign Here ? Date? RETURN THIS FORM AND REPORT ANY CHANGES IN THE ABOVE INFORMATION TO THE STATE AGENCY THAT YOU DO BUSINESS WITH FOR STATE AGENCY USE ONLY DO NOT WRITE BELOW THIS LINE (main **VENDOR #** MC(s) MC(s) address) (remittance address) **TIN CHANGE NEW VENDOR** NAME CHANGE AGY AGENCY CONTACT AGENCY CONTACT PHONE # FXT **APPROVED BY (PRINT)** (SIGNATURE)

Date

SUBSTITUTE W-9 INSTRUCTION SHEET

Purpose of form. The State of Arizona is required to file information returns with the IRS and provide correct taxpayer identification numbers (TINs) to report taxable income paid.

THE STATE WILL ISSUE FORM 1099-MISC BY JANUARY 31ST OF THE YEAR AFTER THE YEAR TAXABLE PAYMENTS OF \$600 OR MORE ARE RECEIVED. FOR MORE INFORMATION CONTACT THE STATE AGENCY FOR WHICH YOU PERFORM SERVICES FOR.

Privacy Act Notice

penalties may also apply.

Section 6109 of the Internal Revenue Code requires you to give your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or MSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 31% of taxable interest. dividend, and certain other payments to a payee who does not give a TIN to a payor. Certain

What is backup withholding? Persons making certain payments to you must withhold and pay to the IRS 31% of such payment under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, non-employee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding. If you give the requestor your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding.

Payments <u>you</u> receive <u>will be subject</u> to backup withholding if:

- You do not furnish your TIN to the requestor,
 or
- 2. You do not certify your TIN when required (see the Part III instructions on page 2 for details.) or
- 3. The IRS tells the requester that you furnished an incorrect TIN, or
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part III instructions and the separate Instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information.

Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

Name and Number 10 Giv	e the Requester
For this type of account	Give name and SSN of:
1. Individual	The individual
2. Two or more	The actual owner of the
individuals (joint	account or, if combined
account)	funds, the first individual
	on the account ^o
3. Custodian account of	The minor ¹
a minor (Uniform Gift	
to Minors Act)	
4. a. The usual	The grantor-trustee ^o
revocable savings	
trust (grantor is also	
trustee)	
b. So-called trust	The actual owner ^o
account that is not a	
legal or valid trust	
under state law	
5. Sole proprietorship	The owner ²
For this type of account	Give name and EIN of:
6. Sole Proprietorship	The owner ²
7. A valid trust, estate, or	Legal entity ³
pension trust	
8. Corporate	The corporation
Association, club,	The organization
religious, charitable,	
educational, or other	
tax-exempt	
organization	
10. Partnership	The partnership
11. A broker or registered	The broker or nominee
nominee	
12. Account with the	The public entity
Dept. of Agriculture in	
the name of a public	
entity (such as a state	
or local government,	
school district, or	
school district, or prison) that receives	
•	

Name and Number To Give the Requester

^oList first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

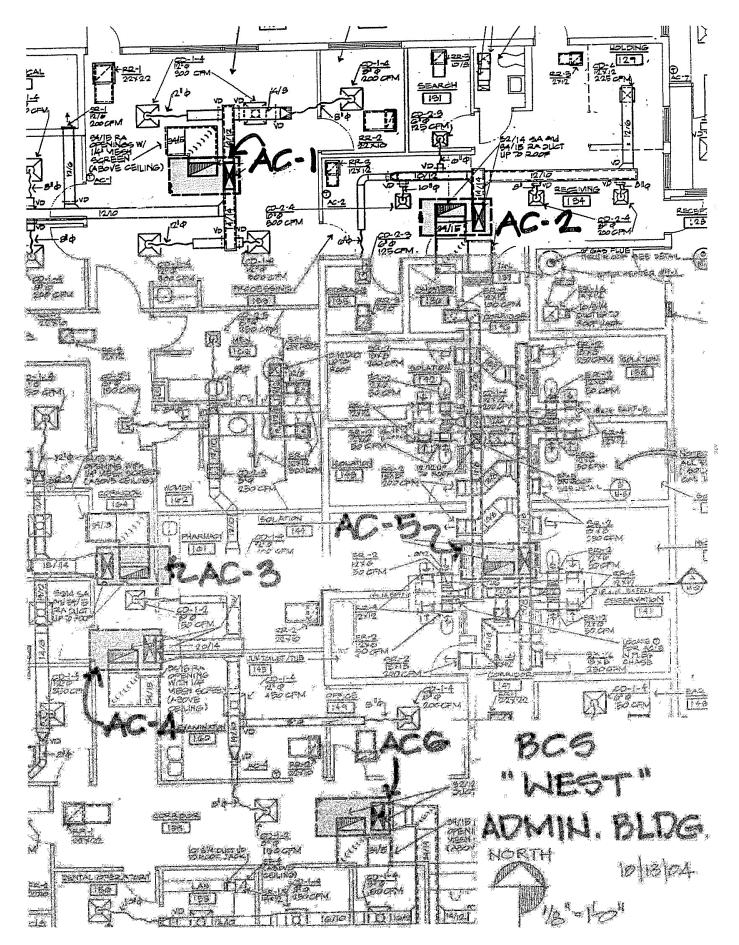
¹Circle the minor's name and furnish the minor's SSN. ²You must show your individual name, but you may also enter your business or "doing business as" name. You may use either your SSN or EIN (if you have one). ³List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name.

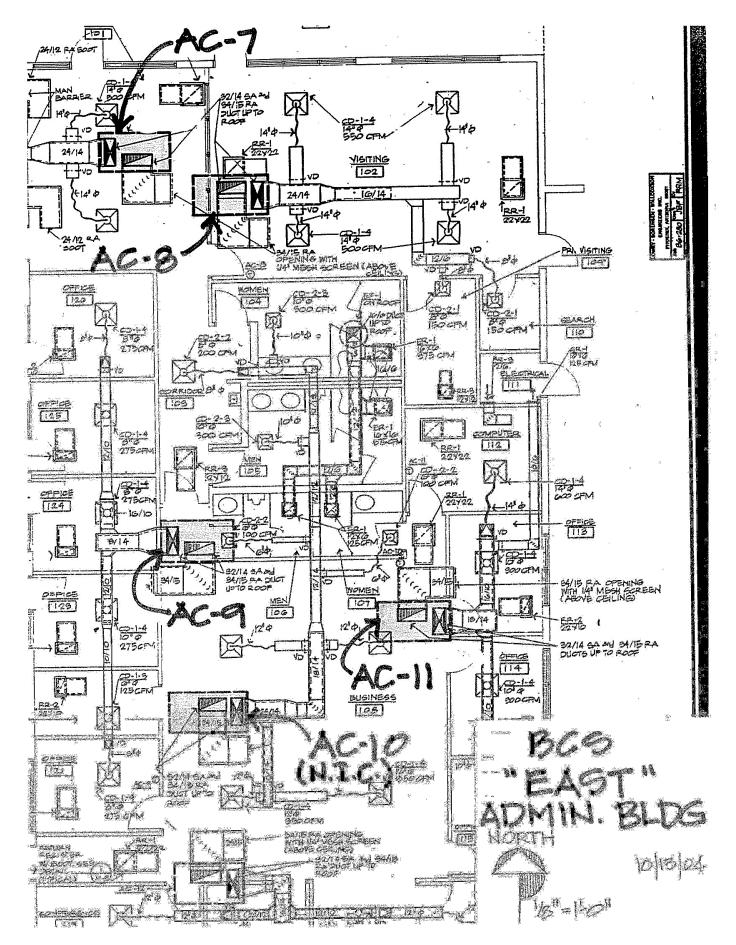
Use Substitute Form W-9 if you are a U.S.	Other entities. Enter your business name as shown	If you are exempt from backup withholding, you
person (including a <u>resident</u> alien), to give your	on the required Federal tax documents. This name	should still complete this form to avoid possible
correct TIN to the requester and, when applicable	should match the name shown on the charter or	erroneous backup withholding. Enter your correct TIN
to:	other legal document creating the entity. You may	in Part I, write "exempt" in Part II, sign and date the
Certify the TIN you are giving is correct (or you	enter any business, trade, or "doing business as"	form. If you are a nonresident alien or a foreign entity
are waiting for a number to be issued).	name on the business name line.	exempt from backup withholding, see page 1 for a list
2. Certify you are not subject to backup		of appropriate form(s) to submit.
withholding, or	Part I – Taxpayer Identification Number (TIN)	
3. Claim exemption from backup withholding if	You must enter your TIN in the appropriate box. If	Part II-Certification
you are an exempt payee.	you are a resident alien and you do not have and	For a joint account, only the person with the TIN in Part
	are not eligible to get an SSN, your TIN is your IRS	I should sign (when required).
If you are a foreign person, IRS requires you use	individual taxpayer identification number (ITIN).	Interest, dividend, and barter exchange accounts
the appropriate form(s) as follows, instead of Form	Enter it in the social security number box. If you do	opened before 1984 and broker accounts
W-9:	not have an ITIN, see How to get a TIN below.	considered active during 1983. You must give your
Form W-8BEN, Certificate of Foreign Status of	IF you are a sole proprietor and you have an EIN,	correct TIN, but you do not have to sign the
Beneficial Owner for United States Tax	you may enter either your SSN or EIN. However,	certification.
Withholding.	using your EIN may result in unnecessary notices to	2. Interest, dividend, broker, and barter exchange
2. Form W-8ECI, Certificate of Foreign Person's	the requester.	accounts opened after 1983 and broker accounts
Claim For Exemption From Withholding on	Note: See the chart on this page for further	considered inactive during 1983. You must sign
Income Effectively Connected With the	Clarification of name and TIN combinations.	the certification or backup withholding will apply. If
Conduct of a Trade or Business in the United		you are subject to backup withholding and you are
States.	How to get a TIN. IF you do not have a TIN, apply	merely providing your correct TIN to the requester,
3. Form W-8EXP, Certificate of Foreign	for one immediately. To apply for an SSN, get Form	you must cross out item 2 in the certification before
Government or Other Foreign Organization for	SS-5, Application for a Social Security Card, from	signing the form.
the United States Tax Withholding.	your local Social Security Administration office. Get	3. Real estate transactions. You must sing the
4. Form W-8IMY, Certificate of Foreign	Form W-7, Application for IRS Individual Taxpayer	certification. You may cross out item 2 of the
Intermediary, Foreign Partnership, or Certain	Identification Number, to apply for an ITIN or Form	certification.
U.S. Branches for United States Tax	SS-4, Application for Employer Identification Number,	4. Other payments. You must give your correct
Withholding.	to apply for an EIN. You can get Forms W-7 and	TIN, but you do not have to sign the certification
5. Form 8233, Exemption From Withholding on	SS-4 from the IRS by calling 1-800-TAX-FORM	unless you have been notified that you have
Compensation for Independent (and Certain	(1-800-829-3676) or from the IRS's Internet Web	previously given an incorrect TIN. "Other
Dependent) Personal Services of a	Site at www.irs.gov.	payments" include payments made in the course of
Nonresident Alien Individual.	If you do not have a TIN, write "Applied For" in the	the requester's trade or business for rents,
Note: If a requester gives you a form other than	space for the TIN, sign and date the form, and give it	royalties, goods (other than bills for merchandise),
Form W-9 or W-8 to request your TIN, you must	to the requester. For interest and dividend	medical and health care services (including
use the requester's form if it is substantially	payments, and certain payments made with respect	payments to corporations), payments to a
similar to the IRS form.	to readily tradable instruments, generally you will	non-employee for services, payments to certain
	have 60 days to get a TIN and give it to the	fishing boar crew members and fishermen, and
Specific Instructions	requester. Other payments are subject to backup	gross proceeds paid to attorneys (including
	withholding.	payments to corporations).
Name. If you are an individual, you must	Note: Writing "Applied For" means that you have	Mortgage interest paid by you, acquisition or
generally enter the name shown on your social	already applied for a TIN OR that you intend to apply	abandonment or secure property, cancellation of
security card. However, if you have changed your	for one soon.	debt, qualified state tuition program payments, IRA
last name, for instance, due to marriage, without		or MSA contributions or distributions, and pension
informing the Social Security Administration of the	Part II-For Payees Exempt from Backup	distributions. You must give your correct TIN, but
name change, enter your first name, the last name	Withholding	you do not have to sign the certification.
shown on your social security card, and your new	Individuals (including sole proprietors) are not	,
last name.	exempt from backup withholding. Corporations are	
If the account is in joint names, list first and then	exempt from backup withholding for certain	
circle the name of the person or entity	payments, such as interest and dividends. For more	
whose number you enter in Part I of the form.	information on exempt payees, see the separate	
and the form of the first art of the form.	Instructions for the Requester of Form W-9.	
Sole proprietor. You must enter your individual		
name as shown on your social security card. You		
may enter your business trade, or "doing business		

PACKAGED AIR CONDITIONING UNIT SCHEDULE

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